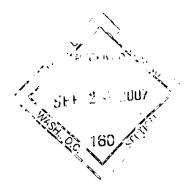
FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL	<u>ب</u>
ONID AFFROVAL	
OMB Number: 3235-0076	

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per form......16.00

SEC USE ONLY						
Prefix	Serial					
DATE F	RECEIVED					

Name of Offering (check if this is an a	mendment and name has	changed, and indicate chan	ge.)		
Brain Matters, Inc.: Common S	tock and Series B C	onvertible Preferred	Stock		
Filing Under (Check box(es) that apply):	☐ Rule 50	14 🔲 Rule 505	Rule 506	☐ Section 4(6)	ULOE
Type of Filing:		New Filing		Amendment	
	Α.	BASIC IDENTIFICATIO	N DATA		
1. Enter the information requested about	the issuer				
Name of Issuer (check if this is an amo	endment and name has cha	nged, and indicate change.)		
Brain Matters, Inc.				110101010111	######################################
Address of Executive Offices	(Number a	nd Street, City, State, Zip C	Code) Telephone N	umber (Includ	07078675
3773 Cherry Creek Drive North	, Ptarmigan Buildi	ıg, West Tower, Suit	e 1020, Denver,	CO 80209	303-607-6518
Address of Principal Business Operations	Number and Street, City,	State, Zip Code)	Telephone N	umber (Including Area Cod	e)
(if different from Executive Offices) Same as Executive Offices			Same as	Executive Offices	PROCESSE
Brief Description of Business			I		/ OFD 0.7
The issuer operates brain imagin	ng and brain dysfun	ction treatment cent	ers.		€ SEP 2 7 2007
Type of Business Organization					THOMSON
⊠ corporation	☐ limited partnership, a	lready formed		☐ other (please speci	(5): FINANCIAL
☐ business trust	☐ limited partnership, to	be formed			111001000
Actual or Estimated Date of Incorporation	or Organization:	Month 01	<u>Year</u> 2003		· · · · · · · · · · · · · · · · · · ·
Ladadhila at Lasanania Tagara		C. Describeration of the contract of the contr		■ Actual	[] Estimated
Jurisdiction of Incorporation or Organization	,	.S. Postal Service abbrevia		DE	
	CN for Canada; Ff	I for other foreign jurisdict	ion <i>)</i>	DE	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or hear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

* · · ·		A. BASIC II	DENTIFICATION DATA		, i
2. Enter the in	formation requested for the fo	llowing:			
Each proEach benEach exe	moter of the issuer, if the issuer	er has been organized within the er to vote or dispose, or direct the corporate issuers and of corpora	e past five years; ne vote or disposition of, 10% or a te general and managing partners		rities of the issuer;
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ Member & Principal of the General Partner
Adams, Ph.D,					
	dence Address (Number and S		G 1 1000 D		
Check Box(es) that Apply:	☐ Promoter	migan Building, West Ti 区 Beneficial Owner	ower, Suite 1020, Denver, C E Executive Officer	☑ 80209 ☑ Director	Member & Principal of the General Partner
· ·	name first, if individual)				
Antebi, Steven Business or Resi	dence Address (Number and S	Street, City, State, Zip Code)		<u>-</u>	
	•		ower, Suite 1020, Denver, C	CO 80209	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	Member & Principal of the General Partner
	name first, if individual)				
Goodhue, Joh					
	dence Address (Number and S		ower, Suite 1020, Denver, C	~~ enann	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	Member & Principal of the General Partner
Full Name (Last	name first, if individual)				···-·· · · · · · · · · · · · · · · · ·
Goodhue, Nan	tey dence Address (Number and S	Same Cit Same Zi= C-3-5			
		•	ower, Suite 1020, Denver, C	CO 80209	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	Member & Principal of the General Partner
•	name first, if individual)				
Bradshaw, Vin	ncent dence Address (Number and S	Street City State 7in Code)			
			ower, Suite 1020, Denver, C	CO 80209	
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	Member & Principal of the General Partner
Full Name (Last	name first, if individual)				
Galpin, M.D.,	Jeffrey dence Address (Number and S	Stand City State 7 in Code)			
	· · · · · · · · · · · · · · · · · · ·	<u></u>	C ! . 1020 D	70.00200	
Check	_ 		ower, Suite 1020, Denver, C		
Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	Member & Principal of the General Partner
Full Name (Last Johnson, Davi	name first, if individual)				
	dence Address (Number and S	Street, City, State, Zip Code)			
3773 Cherry C Check Box(es) that Apply:	Creek Drive North , Ptar	migan Building, West T	ower, Suite 1020, Denver, C Executive Officer	CO 80209 Director	☐ Member & Principal of the General Partner

Keeler, Dianna

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

3773 Cherry Creek Drive North, Ptarmigan Building, West Tower, Suite 1020, Denver, CO 80209

•	B. INFORMATION ABOUT OFFERING
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?
2.	What is the minimum investment that will be accepted from any individual?
3.	Does the offering permit joint ownership of a single unit? Yes _X_ No
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.
	None
	Full Name (Last name first, if individual)
	Business or Residence Address (Number and Street, City, State, Zip Code)
	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
	(Check "All States" or check individual States)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of t Type of Security	Aggregate	_	Amount Already
		Offering Price		Sold
	Debt	\$0.00		\$0.00
	Equity	\$		\$000
	Common Stock* Preferred	\$ 2.500.000.00 *		\$ <u>0.00</u>
	Convertible Securities (including warrants): Series B Convertible Preferred Stock**	\$_3,286,000,00**		\$0.00
	Partnership Interests	\$0.00	!	\$
Cor ("S	e Issuer may not have had the necessary authority to issue the shares of Series A 10% Redeemable nvertible Cumulative Preferred Stock ("Series A Stock") and Series B Convertible Preferred Stock (eries B Stock") issued prior to July 25, 2006 under applicable law. As a result, the Issuer is conducting escission offer to holders of its Series A Stock and Series B Stock issued prior to July 25, 2006.			
Sto Sto	the Issuer intends to offer up to 2,500,000 shares of common stock to holders of the Issuer's Series A bock in exchange for the Series A Stock at the rate of one share of common stock for one share of Series A bock and one share of common stock for each \$1.00 of accrued and unpaid dividends on the Series A bock. The aggregate dollar value of the common stock offered is \$2,500,000; however, the issuer will eive no cash proceeds from the offering.			
Issi Ser	The Issuer also intends to offer up to 1,643,000 shares of newly issued Series B Stock to holders of the uer's previously issued Series B Stock in exchange for the Series B Stock at the rate of one share of new ries B Stock for one share of previously issued Series B Stock. The aggregate dollar value of the new ries B Stock is \$3,286,000; however, the issuer will receive no cash proceeds from the offering.			
	*These numbers reflect the aggregate value of the securities to be offered. No proceeds will be realized the Issuer.			
Uy	Total	\$_5,786,000.00***	:	\$ 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	-	<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	0	-	\$0.00
	Non-accredited Investors	0		s 0
	Total (for filings under Rule 504 only)	N/A	_	\$N/A
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
	Not Applicable			
		Type of		Dollar Amount
	T. COM:	Security		Sold
	Type of Offering			•
				\$
	Rule 505			
	Regulation A			s
	Regulation A			\$ \$
	Regulation A			s
4.	Regulation A			\$ \$
4.	Regulation A			\$ \$
4.	Regulation A			ss ss
4.	Regulation A			ss ss
4.	Regulation A			\$ \$ \$ \$
4.	Regulation A			\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$ 50,000,00
4.	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees, Accounting fees, Blue Sky Fees and Expenses. Accounting Fees			\$\$ \$\$ \$\$ \$\$ \$\$ \$\$,500.00 \$\$ \$\$ \$\$ \$\$ \$\$ \$\$
4.	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees, Accounting fees, Blue Sky Fees and Expenses Accounting Fees Engineering Fees			\$

C. OFFERING PRICE, NUMBER OF	INVESTORS, EXPENSES AND	USE OF PROCE	EDS		
b. Enter the difference between the aggregate offering price given in response to Part C – Question 4.a. This difference is the "adjusted				x 3	5,733,500,00***
 Indicate below the amount of the adjusted gross proceeds to the issuer us If the amount for any purpose is not known, furnish an estimate and chec payments listed must equal the adjusted gross proceeds to the issuer set for 	k the box to the left of the estima	te. The total of the	iown.		
		Payment to Off Directors, & Aff			Payment To Others
Salaries and fees:		□ s	0.00	□ s_	0.00
Purchase of real estate	,	□ \$	0.00	□ s_	0.00
Purchase, rental or leasing and installation of machinery and equipment	***************************************	□ s	0.00	□ s_	0.00
Construction or leasing of plant buildings and facilities		□ s	0.00	□ s_	0.00
Acquisition of other businesses (including the value of securities involved in t in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness		□ s	0.00		0.00
Working capital and general corporate purposes			0.00		0.00
Totaling cupital and general corporate purposes	***************************************	□ s	0.00	I	5,733,500.00***
Other (specify):		□ s	0.00	□ s _	0.00
Column Totals		□ s	0.00	×s_	5.733,500.00***
Total Payments Listed (column totals added)		E	3 \$ <u>5.7</u>	33,500.00	<u>)***</u>
***These numbers reflect the value of the securities offered. No proceeds Issuer.	s will be realized by the				
D. FED	DERAL SIGNATURE			•	* * * * *
The issuer had duly caused this notice to be signed by the undersigned duly at an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conon-accredited investor pursuant to paragraph (b)(2) of Rule 502.					
Issuer (Print or Type)	Signature	<u> </u>		Date	
Brain Matters, Inc.	MA	21		Septem	ber <u>19</u> , 2007
Name of Signer (Print or Type)	Title of Sieder (Print or Type)				
John M. Goodhue	President and CEO				
	1	 			

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature /	Date
Brain Matters, Inc.	1/1/2/	September <u>19</u> , 2007
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
John M. Goodhue	President and CEO	

Instruction

Final the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Appendix 2 Type of security and aggregate Intend to sell to Type of investor and amount purchased in state Disqualification under non-accredited offering price offered in state (Part C – Item 2) state ULOE (if yes, attach (Part C - Item 1) investors in State explanation of waiver ({Part B - Item granted) (Part E - Item 1) 1) Up to \$2,500,000 of Common Number of Number of State Yes No Stock and up to \$3,286,000 Series Accredited Amount Non-accredited Amount Yes No B Convertible Preferred Stock investors Investors_ ΑL ΑK AZAR CA CO CTDE DC FLGA HIID 11 IN ΙA KS ΚY ME MD ΑM ΜI MN MS МО MT NE

1 ,	non-ac	to sell to credited ors in State B – Item	Type of security and aggregate offering price offered in state (Part C – Item 1)	(Part C – Item	or and amount pur 2)	, sta , ex	5 Disqualification under state ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)			
State	Yes	Up to \$2,500,000 of Common Stock and up to \$3,286,000 Series		Number of Accredited investors	Amount	Number of Non-accredited Investors	Amount	Yes	No	
NV										
NH		_								
NJ										
NM										
NY		x	Same	0	0	0	0		x	
NC										
ND										
ОН										
ok										
OR										
PA										
RI										
sc										
SD		4			-					
TN										
TX										
UT										
VT	-									
VA	_	1		-	- †			<u> </u>		
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PR	1	•					-	 		

